Payment to Agency I	Report A Pı	ublic Document		PAYMENT TO AGENCY REPOR
1. Agency Name			Date Stamp	California Q 0 1
City of San Jose			n Josa City Clar	Form OU I
Division, Department, or Re	egion (if applicable)	- Jus (For Official Use Only
Office of The City Clerk		76 10	MAY 24 PH L: I	8
Street Address				
200 East Santa Clara Stre	et			
Area Code/Phone Number	Email		Amendment (explain in	a comment costion)
408-535-1260	commissions@sanjoseca	a.gov	Amendment (explain in	1 comment section)
Agency Contact (name and title		Da	te of Original Filing: _	(month, day, year)
Toni J. Taber, CMC City C	Clerk			(month, day, your)
2. Donor Name and Addr	ess			
☐ Individual		☐ Other	ato's Japanese Cu	iisine
Last Name	First Name	_		ame
617 North 6th Street	San	José 	CA	95112
Address	City		State	Zip Code
Other- Organization				
If "Other" is marked, describe the enti	ty's business activity (if business) or its r	nature and interests.		
If applicable,	identify the name of each sour	ce and the amount(s) receive	ed by the donor for th	nis payment:
	¢.			c
Name			Name	—— Φ——————————————————————————————————
Transportation Provider	Rail Air	- ☐ Bus ☐ Auto ☐ Applicable Boxes	Other	nme of Lodging Facility
\$ Lodging Expenses	\$ \$ Trans	sportation Expenses \$Oth	er Expenses	\$ Total Expenses
3.1 (b) Payment(s) not re	elated to travel:	5/14/19	\$ 20.00	
		Dates (month, day, yea	ar)	Total Expenses
Provided the Office of Boards and Commissi	n. Provide a specific desc the City Clerk with a do ions Recognition Event	onation valued at \$20 on May 14, 2019. A 0	to be used as a Copy of the log i	door prize at the
	who used the payment in			o of the City Clark
Reyes	Rachel	Deputy City Cler		e of the City Clerk Department/Division
Last Name	First Name	Position/ Ht	i c	peharmani/pivision
Last Name	First Name	Position/Tit	lle	Department/Division
. Verification				
Lauthorized the acdemans	e of the reported payment(s)	as in compliance with FF	PPC regulations.	
	Toni J. Taber	City Clerk		Spulia
Signature	Print Name		Title	(month, day, year)
Oignature	i inici value	•	5	(
Comment:				
(Use this space or an attachment	for any additional information)			EDBC Form 904 / Jon/49

Donation From	Address	City	Zip	Item(s) Donated	Estimated		
						Value	
San Jose Museum of Art	110 S. Market St	San Jose, CA	95110	10 Admission Passes	\$	100.00	
Office of Clean Energy	200 E. Santa Clara St	San Jose, CA	95113	Reusable bags, pencils and erasers	\$	60.00	
CanyonSnow	459 Monterey Ave.	San Jose, CA	95030	Coffee Gift Certificates	\$	100.00	
HOTWORX	54 West Santa	San Jose, CA	95113	One Month Membership	\$	100.00	
	Clara Street						
City Lights Theatre Company	529 S. 2nd Street	San Jose, CA	95112	2 -Single Tickets	\$	80,00	
Minato's Japanese	617 North 6th	San Jose, CA	95112	Food and beverage gift certificate	\$	20,00	
Cuisine	Street			×			
John's of Willow Glen	1238 Lincoln Ave:	San Jose, CA	95120	Food and beverage gift certificate	\$	50.00	
Office of	200 E. Santa Clara	San Jose, CA	95113	2-\$50 Gift Certificates	\$	100.00	
Councilmember	St	`					
Johnny Khamis							
San Jose Museum of Quilts and Textiles	520 S. 1st Street	San Jose, CA	95113	Family Dual Membership for 1 year	\$	75,00	
Office of	200 E. Santa Clara	San Jose, CA	95113	3- Flashlights	\$	20.00	
Councilmember Dev	St	,					
Davis	MAN (1987)						
Office of Councilmember Pam Foely	200 E. Santa Clara St	San Jose, CA	95113	3- Jackets and 8 t-shirts	\$	100.00	
Viva Calle SJ	200 E. Santa Clara St	San Jose, CA	95113 4	1 - T- shirt and 2- bandanas	\$	100.00	
Councilmember Raul Peralez	200 E. Santa Clara St	San Jose, CA	95113 5	5- t-shirts	\$.	100.00	
Office of	200 E. Santa Clara	San Jose, CA	95113 F	Reusable bags and sunglasses	\$	50.00	
Councilmember Sergio	St						
Jimenez	•						
	200 E, Santa Clara St	San Jose, CA	95113 R	teusable bags	\$	50.00	
	Oracle Park 24	San	94107 A	autographed picture	-	\$100	
	Willie Mays Plaza	Francisco, Ca					
				TOTAL	\$ <u>1</u> ,	205.00	